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B1 (Official Form 1)(04/13)					arrio.		ago I				
·	United N	d Stat	tes Ban rn Distri	krı ict o	ıptey f Illin	Cour	rt			Voluntary	Petition
Name of Debtor (if individua Kouzoukas, Maria S	il, enter Last, Fi	rst, Midd	le):			Nar	me of Join	t Debtor (Spo	ouse) (Last, First,	Middle):	
All Other Names used by the (include married, maiden, and	Debtor in the lal trade names):	st 8 years	S			All (inc	Other Nan	nes used by the decirity of th	he Joint Debtor is und trade names).	n the last 8 years	· ·
Last four digits of Soc. Sec. o (if more than one, state all)	r Individual-Tax	payer I.I	D. (ITIN)/Co	omple	te EIN	Last (if mo	t four digit	s of Soc. Sec	. or Individual-Ta	axpayer I.D. (ITIN) N	o./Complete EIN
Street Address of Debtor (No. 6565 N. Harlem Chicago, IL	and Street, City	, and Sta	te):				et Address	of Joint Deb	tor (No. and Stre	et, City, and State):	
County of Residence or of the	Principal Place	of Busin	ess:	606	ZIP Code 331		nty of Res	idence or of t	he Principal Plac	e of Business:	ZIP Code
Mailing Address of Debtor (if	different from s	reet add	ress):			Mail	ing Addre	ss of Joint De	ebtor (if different	from street address):	
Location of Principal Assets of	Business Debto	or		. 2	ZIP Code			1144	÷.		ZIP Code
(if different from street address Type of Debte	above):					·			•		
(Form of Organization) (Ci Individual (includes Joint I See Exhibit D on page 2 of this Corporation (includes LLC Partnership Other (If debtor is not one of the check this box and state type of the Country of debtor's center of main	Debtors) form. and LLP) the above entities, entity below.) ors	☐ Sin ☐ Ra ☐ Sto	ealth Care B ngle Asset F 11 U.S.C. § ilroad ockbroker ommodity B earing Bank her	roker empt	ss state as (51B)	-	Cha Cha Cha Cha Cha	pter 7 pter 9 pter 11 pter 12 pter 13	Petition is Filed Chap of a Chap of a Nature o (Check of		cognition ling cognition
Each country in which a foreign pr by, regarding, or against debtor is p	oceeding ending:	Coc	(Check bo otor is a tax-e ler Title 26 of le (the Intern	x, if ap exempt f the U	oplicable) organiza nited Sta	ition tes	Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as business debts. "incurred by an individual primarily for			re primarily s debts.	
Full Filing Fee attached Filing Fee to be paid in installm attach signed application for the debtor is unable to pay fee exceptorm 3A. Filing Fee waiver requested (appattach signed application for the	court's considerate of in installments. blicable to chapter court's considerati	individua ion certify Rule 1006	ing that the (b). See Office	cial	Check all	ebtor is a si ebtor is not ebtor's aggre e less than! I applicable plan is bein eceptances of	a small bus regate nonce \$2,490,925 boxes: ng filed with	ss debtor as definess debtor as ontingent liquid (amount subject this petition.	t to adjustment on	101(51D)	years thereafter).
tatistical/Administrative Info Debtor estimates that funds we be Debtor estimates that, after a there will be no funds availa	vill be available	ertu ic av	cluded and	admi.	red cred	itors.				ACE IS FOR COURT US	SE ONLY
stimated Number of Creditors	200- 999] 1,000- 5,000	5,001- 10,000	10,00 25,00	00 5	5,001- 0,000	50,001- 100,000	OVER 100,000			,
\$0 to \$50,001 to \$100,000 \$550,000 \$550,000 \$550,000 \$550,000	to \$500,001 \$ to \$1 to million n	1,000,001 5 \$10 hillion 1,000,001	\$10,000,001 to \$50 million	\$50,00 to \$10 millio	n to	100,000,001 \$500 tillion	\$500,000,001 to \$1 billion	\$1 billion	4.2		
\$50,000 \$100,000 \$500,000	to \$1 to	\$10 sillion	to \$50 million	to \$10 million	0 to	100,000,001 \$500 illion	\$500,000,001 to \$1 billion	More than \$1 billion	Ī		

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	ary Petition	Name of Debtor(s):	Page	
i .		Kouzoukas, Maria S		
(This page	must be completed and filed in every case)			
Location	All Prior Bankruptcy Cases Filed Within Las	t 8 Years (If more than t	wo, attach additional sheet)	
Where Filed	d: - None -	Case Number:	Date Filed:	
Location Where Filed	d:	Case Number:	Date Filed:	
	Pending Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor	(If more than one, attach additional sheet)	
Name of De	ebtor:	Case Number:	Date Filed:	
District:		Relationship:	Judge:	
pursuant to and is requ	Exhibit A Inpleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission of Section 13 or 15(d) of the Securities Exchange Act of 1934 testing relief under chapter 11.) it A is attached and made a part of this petition.	I, the attorney for the pe have informed the petiti 12, or 13 of the 11, Uni under each such chapter required by 11 U.S. S.	Exhibit B is an individual whose debts are primarily consumer debts.) titioner named in the foregoing petition, declare that I coner that I oner that	
**	Exh	<u> </u> ibit C		
Does the deb	otor own or have possession of any property that poses or is alleged to all Exhibit C is attached and made a part of this petition.	pose a threat of imminent an	nd identifiable harm to public health or safety?	
(T) 1		ibit D		
Exhibi	pleted by every individual debtor. If a joint petition is filed, each t D completed and signed by the debtor is attached and made a point petition: The place completed and signed by the joint debtor is exactly deptated.	part of this petition.		
	t D also completed and signed by the joint debtor is attached a		ition.	
	Information Regarding (Check any app	=		
	Debtor has been domiciled or has had a residence, principa days immediately preceding the date of this petition or for a	I place of husiness or pri	ncipal assets in this District for 180	
	There is a bankruptcy case concerning debtor's affiliate, get			
	Debtor is a debtor in a foreign proceeding and has its princi this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	pal place of business or p	principal assets in the United States in	
	Certification by a Debtor Who Resides (Check all appli	as a Tenant of Residen	tial Property	
	Landlord has a judgment against the debtor for possession of		ox checked, complete the following.)	
	(Name of landlord that obtained judgment)			
	(Address of landlord)	<u>·</u>		
	Debtor claims that under applicable nonbankruptcy law, the the entire monetary default that gave rise to the judgment for	re are circumstances under	er which the debtor would be permitted to cure	
	Debtor has included with this petition the deposit with the coafter the filing of the petition.	ourt of any rent that would	d become due during the 30-day period	
	Debtor certifies that he/she has served the Landlord with this	s certification. (11 U.S.C.	8 362(1))	

Date

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Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case)	Kouzoukas, Maria S
Signature(s) of Debtor(s) (Individual/Joint)	natures
I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under	Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petitic is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.
chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).	(Check.only one box.) I request relief in accordance with chapter 15 of title 11. United States Co- Certified copies of the documents required by 11 U.S.C. §1515 are attach
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapt of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
VI O cee	X
Signature of Debtor Maria S Kouzoukas	Signature of Foreign Representative
X	District Control of the Control of t
Signature of Joint Debtor	Printed Name of Foreign Representative
<u> </u>	Date
Telephone Number (If not represented by attorney)	
2-15	Signature of Non-Attorney Bankruptcy Petition Preparer
Date	I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for
Signature of Attorney*	compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b),
V Nitrolli	110(h), and 342(b); and, (3) if rules or guidelines have been promulgated
X Ignature of Attorney for Debtor(s)	pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice
	of the maximum amount before preparing any document for filing for a
Lester A. Ottenheimer III 3127572 Printed Name of Attorney for Debtor(s)	debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.
Ottenheimer Law Group, LLC	
Firm Name	Printed Name and title, if any, of Bankruptcy Petition Preparer
750 Lake Cook Road	
Suite 290 Buffalo Grove, IL 60089	Social-Security number (If the bankrutpcy petition preparer is not
Banalo Crove, IL 00003	an individual, state the Social Security number of the officer
Address	principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)
847-520-9400 Fax: 847-520-9410	
Telephone Number	
Date	Address
*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a	X
certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	X
Signature of Dahton (Company) (D. 1	Date
Signature of Debtor (Corporation/Partnership)	Signature of health of the
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above. Names and Social-Security numbers of all other individuals who prepared or
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	assisted in preparing this document unless the bankruptcy petition preparer is not an individual:
(
Signature of Authorized Individual	
	If more than one person prepared this document, attach additional sheets
Printed Name of Authorized Individual	conforming to the appropriate official form for each person.
	A bankruptcy petition preparer's failure to comply with the provisions of
Title of Authorized Individual	title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.
	- · · · · · · · · · · · · · · · · · · ·

RETENTION AGREEMENT

BEFORE THE CASE IS FILED:

The Debtor Agrees To:

- 1. Discuss with attorney the Debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income

The Attorney Agrees To:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 7 or Chapter 13 case, discuss both procedures (as well as non-bankruptcy options) with the debtor and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees, if any, are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and scheduled, as well as all amendments thereto, whether filed with the petition or the later.
 - 4. Timely prepare and file the debtor's petition, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, with particular attention to housing and vehicle payments.
 - 6. Advise the debtor of the need to maintain appropriate insurance.

AFTER THE CASE IS FILED:

The Debtor Agrees To:

- 1. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card (If the identification card does not include the debtor's social security number, the debtor will also bring to the meeting a social security card.)
 - 2. Notify the attorney of any change in the debtor's address or telephone number.
- 3. Inform the attorney immediately of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.

- 4. Contact the attorney immediately if the debtor loses employment, has a significant change in income or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings or an inheritance).
- 5. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 6. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 7. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
 - 8. Supply the attorney with copies of all tax returns filed while the case is pending.
 - 9. Sign another Retention Agreement after the case is filed.

The Attorney Agrees To:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination).
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any other court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 7 trustee properly documented proof of income, pay advices and required tax returns for the debtor including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file and serve an amended plan.
- 7. Timely prepare, file and serve any necessary statements, amended statements and schedules and any change of address, in accordance with information provided by the debtor.
 - 8. Be available to respond to the debtor's questions.
 - 9. Prepare, file and serve timely amendments, if necessary.

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- 10. Object to improper or invalid claims, if necessary.
- 11. Timely respond to motions for relief from stay.
- 12. Prepare, file, and serve all appropriate motions to avoid liens.
- 13. Provide any other legal services necessary for the administration of the case.

Payment of Attorneys' Fees:

1. For all the services outlined above, the attorney will be paid a fee of \$2,500.00 plus \$335.00 filing fee.

Prior to signing this agreement, the attorney has received \$_______.

- 2. Early termination of the case. Fees payable under the provisions set out above are not refundable in the event that the case is dismissed, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If a dismissal is due to such a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 3. *Improper conduct by the attorney*. If the Debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 4. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise not engaging in proper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.

5. Discharge of the attorney. The debtor may discharge the attorney at any time.

Signed:

Maria Kouzoukas

Lester A. Ottenheimer, III Attorney for Debtor(s) Case 15-04500 Doc 1 Filed 02/11/15 Entered 02/11/15 15:03:09 Desc Main Document Page 7 of 48

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

	Northern District of Himols										
In re	Maria S Kouzoukas							Case No.			
	• .	. ·				Debtor(s)	: •	Chapter	7	: .	

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

□ 4. I am not required to receive a credit counseling briefing because of:	[Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]	

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont. Page 2
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); ☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct. Signature of Debtor: Maria S Kouzoukas Date:

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B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	Maria S Kouzoukas		Case No		
		Debtor	,		
			Chapter	7	
			• -		

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	95,000.00		
B - Personal Property	Yes	3	28,785.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		203,168.61	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		11,829.14	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			4,041.38
J - Current Expenditures of Individual Debtor(s)	Yes	2			4,086.33
Total Number of Sheets of ALL Schedu	ıles	20			
	T	otal Assets	123,785.00		
			Total Liabilities	214,997.75	

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B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	Maria S Kouzoukas		Case No		
-		Debtor	,		
			Chapter	7	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 12)	4,041.38
Average Expenses (from Schedule J, Line 22)	4,086.33
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	4,041.36

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		108,168.61
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		11,829.14
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		119,997.75

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B6A (Official Form 6A) (12/07)

In re	Maria S Kouzoukas	Case No.	
_			
		Debtor	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Debtor's residence - 6565 N. Harlem, Chicago, IL		-	95,000.00	203,168.61
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > **95,000.00** (Total of this page)

Total > **95,000.00**

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B6B (Official Form 6B) (12/07)

In re	Maria S Kouzoukas	Case No.	
_		Debtor	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	, ,	,		
	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash on Debtor's person	-	40.00
2.	Checking, savings or other financial accounts, certificates of deposit, or	Checking account - Chicago Patrolmen's Federal Credit Union	-	200.00
	shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Savings account - PNC Bank	-	800.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	1 laptop (5 years old) - 1 printer, , 2 televisions, 1 DVD player, miscellaneous appliances, dinning room table and chairs, living room furniture, 2 sets of bedroom furniture.	-	1,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Miscellaneous pictures	-	200.00
6.	Wearing apparel.	Miscellaneous wearing apparel	-	150.00
7.	Furs and jewelry.	Miscellaneous costume jewelry, 1 watch	-	300.00
8.	Firearms and sports, photographic, and other hobby equipment.	25 Cab KELTEC 1 Smith & Wesson 9 MM 1 380 Pistol	-	750.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Term only life insurance	-	0.00
10.	Annuities. Itemize and name each issuer.	X		
		/Tota	Sub-Tot l of this page)	al > 3,440.00

2 continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Maria S Kouzoukas	Case No	

Debtor

SCHEDULE B - PERSONAL PROPERTY

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	Х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	Deferr	red compensation 457(b) Plan	-	23,270.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
				Sub-Tota	al > 23,270.00

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Maria S Kouzoukas	Case No.
III IC	Wai la 3 Nouzoukas	Case Ivo.

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	20	07 Hyundai Sonata (86,000 miles)	-	1,975.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	Ва	rbeque grill, miscellaneous tools	-	100.00

Sub-Total > (Total of this page)

28,785.00 Total >

2,075.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Maria S Kouzoukas	Case No.	

Debtor

SCHEDULE C	- PROPERTY CLAIMED	AS EXEMPT	
Debtor claims the exemptions to which debtor is entitled (Check one box) 11 U.S.C. §522(b)(2) 11 U.S.C. §522(b)(3)	\$155,675.	ebtor claims a homestead exe Amount subject to adjustment on 4/1, with respect to cases commenced on	/16, and every three years therea
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property Debtor's residence - 6565 N. Harlem, Chicago, IL 60631	735 ILCS 5/12-901	15,000.00	95,000.00
<u>Cash on Hand</u> Cash on Debtor's person	735 ILCS 5/12-1001(b)	40.00	40.00
Checking, Savings, or Other Financial Accounts, C Checking account - Chicago Patrolmen's Federal Credit Union	Certificates of Deposit 735 ILCS 5/12-1001(b)	200.00	200.00
Savings account - PNC Bank	735 ILCS 5/12-1001(b)	800.00	800.00
Household Goods and Furnishings 1 laptop (5 years old) - 1 printer, , 2 televisions, 1 DVD player, miscellaneous appliances, dinning room table and chairs, living room furniture, 2 sets of bedroom furniture.	735 ILCS 5/12-1001(b)	1,000.00	1,000.00
Books, Pictures and Other Art Objects; Collectible Miscellaneous pictures	<u>s</u> 735 ILCS 5/12-1001(b)	200.00	200.00
<u>Wearing Apparel</u> Miscellaneous wearing apparel	735 ILCS 5/12-1001(a)	150.00	150.00
<u>Furs and Jewelry</u> Miscellaneous costume jewelry, 1 watch	735 ILCS 5/12-1001(b)	300.00	300.00
Firearms and Sports, Photographic and Other Hob 25 Cab KELTEC 1 Smith & Wesson 9 MM 1 380 Pistol	oby Equipment 735 ILCS 5/12-1001(d)	750.00	750.00
Interests in Insurance Policies Term only life insurance	215 ILCS 5/238	0.00	0.00
Interests in IRA, ERISA, Keogh, or Other Pension of Deferred compensation 457(b) Plan	or Profit Sharing Plans 735 ILCS 5/12-1006	23,270.00	23,270.00
Automobiles, Trucks, Trailers, and Other Vehicles 2007 Hyundai Sonata (86,000 miles)	735 ILCS 5/12-1001(c)	2,400.00	1.975.00

Total: 44,110.00 123,685.00

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B6D (Official Form 6D) (12/07)

In re	Maria S Kouzoukas	Case No.	
_		Dehtor	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J H		CONTINGEN	N L Q U L D	ISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. Nationstar Mortgage P.O. Box 650783 Dallas, TX 75265		-	NOTICE PURPOSE ONLY	Т	A T E D			
Account No.	╀	-	Value \$ 95,000.00 Unpaid assessments				0.00	0.00
Oakwood Court Condominium Assoc. Cagan Management Group, Inc. 3856 Oakton Street Skokie, IL 60076		-	Debtor's residence - 6565 N. Harlem, Chicago, IL 60631	-				
A N	╀	╀	Value \$ 95,000.00	_		Н	3,743.17	3,743.17
Account No. Douglas John Sury 128 South County Farm Road Wheaton, IL 60187			Oakwood Court Condominium Assoc.				Notice Only	
Account No.	╀	╀	Value \$	_		Н		
Keay & Costello, P.C. 128 S. County Farm Road Wheaton, IL 60187			Oakwood Court Condominium Assoc.				Notice Only	
			Value \$					
continuation sheets attached	•		S (Total of t	Subt			3,743.17	3,743.17

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 $B6D\ (Official\ Form\ 6D)\ (12/07)$ - Cont.

In re	Maria S Kouzoukas	Case No	
_		Debtor	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Hu H C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	UNLIQUIDA	U T E	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			Special Assessment	Ť	D A T E D			
Oakwood Court Condominium Assoc. Cagan Management Group, Inc. 3856 Oakton Street Skokie, IL 60076		-	Debtor's residence - 6565 N. Harlem, Chicago, IL 60631		D			
	_		Value \$ 95,000.00	_		Ш	3,000.00	3,000.00
U.S. Bank c/o Shapiro Kreisman & Associates 2121 Waukegan Road, Suite 301 Bannockburn, IL 60015		_	First Mortgage Debtor's residence - 6565 N. Harlem, Chicago, IL 60631					
			Value \$ 95,000.00				196,425.44	101,425.44
			Value \$					
Account No.			Value \$					
Account No.								
	<u> </u>	<u></u>	Value \$	 Sub	tota			
Sheet <u>1</u> of <u>1</u> continuation sheets attack. Schedule of Creditors Holding Secured Claims		d to	(Total of				199,425.44	104,425.44
-			(Report on Summary of So		Γota dule		203,168.61	108,168.61

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B6E (Official Form 6E) (4/13)

In re	Maria S Kouzoukas	Case No.	
-		Debtor	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.	
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)	
Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible rof such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).	relati
☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment trustee or the order for relief. 11 U.S.C. § 507(a)(3).	nt of
☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichev occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).	
☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of but whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).	usine
☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).	
☐ Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were no delivered or provided. 11 U.S.C. § 507(a)(7).	ot
☐ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).	
Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Foreserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).	edera
Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).	

0 continuation sheets attached

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	Maria S Kouzoukas	Case No.
		Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS	000		sband, Wife, Joint, or Community	COZ	UNL	I C	5	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J C H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	L Z G	LLQULDAT	T F		AMOUNT OF CLAIM
Account No. xxxxxxxxxxx4891			Claim incurred from miscellaneous purchases.	T	T E D			
ABT Electronics Synchrony Bank P.O. Box 960061 Orlando, FL 32896-0061		-			U			901.26
Account No. 551086661677	t	Г		П	Г	T	\dagger	
Allied Interstate, LLC P.O. Box 1954 Southgate, MI 48195-0954			ABT Electronics					Notice Only
Account No. xxxxx6902	T		Medical services			T	1	
Advocate Healthcare Lutheran General Hospital P.O. Box 4249 Carol Stream, IL 60197-4249		-						25.70
Account No. xxxxx2265	H		Medical services			H	+	
Advocate Healthcare Lutheran General Hospital P.O. Box 4249 Carol Stream, IL 60197-4249		_						109.70
	上	Ш				L	+	103.70
continuation sheets attached			(Total of the	Subt his p)	1,036.66

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B6F (Official Form 6F) (12/07) - Cont.

In re	Maria S Kouzoukas		Case No.	
		Debtor	•7	

							_	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	<u></u> 은	U N L	P	1	
MAILING ADDRESS	CODEBTOR	Н	DATE CLAIM WAS INCURRED AND	CONT	11	IО	ı	
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLAIM	- 1	ΙQ	Į U	اي	AMOUNT OF CLAIM
AND ACCOUNT NUMBER (See instructions above.)	Ö	C	IS SUBJECT TO SETOFF, SO STATE.	G	١Ľ	Ė		AMOUNT OF CLAIM
·	R	L		N G E N T	D A	D	1	
Account No.	1		Medical services	'	A T E D		1	
Advocate Healthcare				\vdash	۲	+	┪	
Lutheran General Hospital		_					1	
P.O. Box 4249							1	
Carol Stream, IL 60197-4249							1	
							1	84.70
Account No. xxxxx6902	╁	\vdash	Medical services	+	+	+	+	
Account No. AAAAAOOO2	┨		imedical services				1	
Advocate Lutheran General Hospital							1	
PO Box 4249		-					1	
Carol Stream, IL 60197-4249							1	
							1	
								25.70
Account No. xxxxx2183	✝	T	Medical services	+	t	t	†	
	1						1	
Advocate Lutheran General Hospital							1	
PO Box 4249		-					1	
Carol Stream, IL 60197-4249							1	
							1	
								317.80
Account No. xxxxxx9993	1		Medical services	T	T		1	
	1							
Advocate Medical Group							1	
P.O. Box 92523		-					1	
Chicago, IL 60675-2523							1	
								6.65
Account No.	╀	\vdash		+	+	+	4	
Account No.	1							
Malcolm S. Gerald & Associates								
332 S. Michigan Avenue, #600			Advocate Medical Group				1	Notice Only
Chicago, IL 60604			That vocate inicatour Group				1	rtotioo omy
Sheet no. <u>1</u> of <u>5</u> sheets attached to Schedule of			<u> </u>	Sub	L tot:	⊥ al	+	
Creditors Holding Unsecured Nonpriority Claims			(Total of				, [434.85
			(Total of		F ~ 7	n-/		

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B6F (Official Form 6F) (12/07) - Cont.

In re	Maria S Kouzoukas		Case No.	
•		Debtor	,	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	Ç	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N G	Q U	T F	AMOUNT OF CLAIM
Account No. xxxx7484			Medical services	Т	l E I		
Advocate Medical Group P.O. Box 92523 Chicago, IL 60675-2523		-			D		129.00
Account No. 9642			Claim incurred from miscellaneous purchases.				
Amazon,com Cardmember Service PO Box 15153 Wilmington, DE 19886		-					1,490.74
Account No. x-9100	┢		Claim incurred from miscellaneous charges.	H	Н		
American Express Box 0001 Los Angeles, CA 90096-8000		-	· ·				1,389.33
Account No. xx9090	Ī		Medical services	П	П		
Associated Allegerists 1300 Reliable Parkway Chicago, IL 60686		-					56.10
Account No.	T		Claim incurred from miscellaneous charges.	Ħ	Н	T	
Citi Advantage PO Box 6500 Sioux Falls, SD 57117		_					1,977.50
Sheet no. 2 of 5 sheets attached to Schedule of	_		S	Subt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of the	nis J	pag	e)	5,042.67

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B6F (Official Form 6F) (12/07) - Cont.

In re	Maria S Kouzoukas	Case No	_
_		Debtor	

						—	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	UZL	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	_ Q U _ D	P U T E	AMOUNT OF CLAIM
Account No. xOS27			Unpaid Parking Citations	T	Ā T E		
City of Chicago Department of Finance 121 N. LaSalle Street Chicago, IL 60602		-			D		968.40
Account No. xxxxxxxxxxxx4427			City violation				
City of Park Ridge Photo Enforcement Program 75 Remittance Drive, Suite 6658 Chicago, IL 60675-6658		-				x	700.00
Account No. 0976	┞		Claim incurred from miscellaneous purchases.	\vdash	igspace	L	7 00.00
Gap PO Box 530942 Atlanta, GA 30353		-	oranii inodii ed ii oni inicociidiicodo paronacco.				1,039.98
Account No. 8780			Claim incurred from miscellaneous purchases.				
Macy's PO Box 94578 Cleveland, OH 44101		-					132.70
Account No. xxxx-xxxxx-xxxxx6736	T		Medical services		Г	Г	
Midwest Dianostic Pahtology, SC 75 Remittance Dr Suite 3070 Chicago, IL 60675		-					18.00
Sheet no. 3 of 5 sheets attached to Schedule of				ub	tota	1	2.050.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	2,859.08

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B6F (Official Form 6F) (12/07) - Cont.

In re	Maria S Kouzoukas	Case No	
_		Debtor	

		_				_	
CREDITOR'S NAME,		Hu	sband, Wife, Joint, or Community		N	D	
MAILING ADDRESS	CODEBTO	Н	DATE CLAIM WAS INCURRED AND	HZOO	U N L I	S	
INCLUDING ZIP CODE,	₽	w	CONSIDERATION FOR CLAIM. IF CLAIM	11 1	Q U	U T E	AMOUNTE OF CLARA
AND ACCOUNT NUMBER (See instructions above.)	0	C	IS SUBJECT TO SETOFF, SO STATE.	G	ĭ		AMOUNT OF CLAIM
,	R	Ŭ		Z G H Z	D A	D	
Account No. xxxxx4715			Claim incurred from miscellaneous purchases.	Т	A T E D		
Nordstrom							
Nordstrom Bank		l_					
PO Box 79134							
Phoenix, AZ 85062							
I Hoemx, AZ 0300Z							405.00
	L						465.32
Account No. xxxx4395			Medical services				
North University Health Systems							
c/o Van Ru Credit Corporation		l_					
1350 E. Touhy Avenue, Suite 350E							
Des Plaines, IL 60018-9207							
Des Plailles, iL 60016-9207							
							241.10
Account No. xxxx9028			Medical services				
NorthShore Univ. Health System							
c/o Pinnacle Management Srvices		-					
830 Roundabout, Suite B							
West Dundee, IL 60118							
							12.48
Account No. xx0027			Medical services				
NorthShore Univ. Healthsystem							
Billing Department		-					
23056 Network Place							
Chicago, IL 60673							
							177.28
Account No. xxxx1249			Medical services				
	1						
Northwest Medical Faculty Foundatio	1	1					
c/o Miramed Revenue Group, LLC		-					
991 Oak Creek Drive	1	1					
							84.24
Sheet no. 4 of 5 sheets attached to Schedule of	_			Subt	otal	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				980.42
The state of the s			(10tai 01)		5	-,	

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B6F (Official Form 6F) (12/07) - Cont.

In re	Maria S Kouzoukas	Case No	
_		Debtor	

	1.	1		_		-	1
CREDITOR'S NAME,	CO		sband, Wife, Joint, or Community	0	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	DEBTOR	A N	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTLNGEN	LIQUIDATE	U T F	AMOUNT OF CLAIM
Account No.			Claim incurred from miscellaneous purchases.	T	T E		
Old Navy PO Box 530942 Atlanta, GA 30353		-			D		865.45
Account No. xxxxxx5621	╁	╁	Medical services	\vdash			
Quest Diagnostics P.O. Box 740397 Cincinnati, OH 45274-0397		-					
							6.23
Account No. xxxxxx3525			Medical services				
Quest Diagnostics P.O. Box 740397 Cincinnati, OH 45274-0397		-					
							6.07
Account No. xxxxxxxxxxxx1573	t		Claim incurred from miscellaneous purchases.				
TJX Rewards/SYNC P.O. Box 530948 Atlanta, GA 30353-0948		-					
							400.53
Account No. xxxxxxxxxx1774			Claim incurred from miscellaneous purchases.				
Value City Furniture PO Box 659704 San Antonio, TX 78265		-					
							197.18
Sheet no. <u>5</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	S (Total of t	Subt			1,475.46
creations from general temptions, claims			(1041)		ota		
			(Report on Summary of Sc				11,829.14

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B6G (Official Form 6G) (12/07)

In re	Maria S Kouzoukas	Case No.	
-		Debtor	

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-04500 Doc 1 Filed 02/11/15 Entered 02/11/15 15:03:09 Desc Main Document Page 26 of 48

B6H (Official Form 6H) (12/07)

In re	Maria S Kouzoukas	Case No	
-		Debtor	
		Denior	

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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	in this information btor 1	to identify your ca									
	btor 2 buse, if filing)										
		ptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
_	se number nown)			-				amende uppleme	d filing ent showing	g post-petition	
<u>O</u>	fficial Form	n B 6I					MM	/ DD/ Y	YYY		
S	chedule I:	Your Inc	ome								12/1
spo atta	use. If you are se ch a separate sh	parated and you eet to this form. be Employment	are married and not fili r spouse is not filing w On the top of any additi	ith you, do not inclu	ıde infor	mati	on about y	our spo	use. If mo	ore space is	needed,
••	information.			Debtor 1			_			ling spouse	
	If you have more attach a separat information abou	e page with	Employment status	■ Employed□ Not employed				☐ Emplo	oyed mployed		
	employers.		Occupation	Police Officer							
	Include part-time self-employed w		Employer's name	City of Chicago)						
	Occupation may or homemaker, i		Employer's address	3510 S. Michiga Chicago, IL 606		ue					
			How long employed t	here? 20 year	rs			_			
Pai	rt 2: Give D	etails About Mor	nthly Income								
	imate monthly incuse unless you are		ate you file this form. If	you have nothing to r	report for	any	line, write \$	0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing e space, attach a		ore than one employer, co	ombine the informatio	on for all e	empl	oyers for the	at perso	n on the lir	nes below. If	you need
							For Debto	or 1		btor 2 or ng spouse	
2.			ry, and commissions (b		2.	\$		0.00	\$	N/A	
3.	Estimate and li	st monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	s Income. Add lir	ne 2 + line 3.		4.	\$	0	.00	\$	N/A	

Deb	tor 1	Maria S Kouzoukas	•	Case ı	number (if known)			
				For	Debtor 1	For Debt	g spouse	
	Cop	by line 4 here	4.	\$	0.00	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$ <u></u> _	0.00	\$	N/A	
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.	\$ <u> </u>	0.00	<u>*</u>	N/A N/A	
	5g.	Union dues	5g.	\$ <u></u>	0.00	\$	N/A N/A	
	5h.	Other deductions. Specify:	5h.+	· -		+ \$	N/A	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	- 6.	\$	0.00	\$	N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	* -	0.00	\$	N/A	
8.			•	~ —	0.00	Ψ	11//	
0.	8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$ <u></u>	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8 g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify: Disability Income	8h.+	\$	4,041.38	+ \$	N/A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	4,041.38	\$	N/A]
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$		1,041.38 + \$	N/	Δ = \$	4,041.38
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ΙΟ. Ψ		+,041.36 · ⁺	14/	^	4,041.30
11.	Stat Inclu othe Do n	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depend		•	ed in <i>Sched</i>	dule J. 1. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainlies				, if it		4,041.38
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?				Combine monthly	
		Yes. Explain: Disability income will cease as of January 1, 201	5					

Official Form B 6I Schedule I: Your Income page 2

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						_		
Fill i	n this informa	ation to identify y	our case:					
Debt	tor 1	Maria S Kou	izoukas			Ch	eck if this is:	
							An amended filing	
Debt	tor 2							wing post-petition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unite	ed States Bank	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case	e number						A separate filing fo	or Debtor 2 because Debtor
(If kn	nown)						2 maintains a sepa	arate household
Of	ficial Fo	orm B 6J				_		
			_ Evnor	.coc				40/4
		J: Your			a filing togathar b	ath ara an	uselly recommendable f	12/1:
info	rmation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Part	1: Desci	ribe Your House	ehold					
١.	_							
	■ No. Go to	o line 2. es Debtor 2 live	in a separa	ate household?				
		lo						
	ΠY	es. Debtor 2 mu	st file a sep	arate Schedule J.				
2.	Do you hav	e dependents?	☐ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents'	' names.			Daughter		6	■ Yes
								□ No
								☐ Yes
								□ No
							_	☐ Yes
								□ No
2	Da		_				_	☐ Yes
3.		penses include of people other t	than ■	No				
		d your depende		Yes				
				_				
Part		nate Your Ongoi		y Expenses uptcy filing date unless y	ou are using this f	orm oc o o	supplement in a Ch	antar 12 anna ta ranart
exp		a date after the		y is filed. If this is a supp				
Inal	uda avnanca	o poid for with	non oach	aovornment accietance i	f vou know			
				government assistance i luded it on <i>Schedule I:</i>)				
	icial Form 6I						Your exp	enses
4.				ses for your residence.	nclude first mortgag	e ,	•	4 259 00
	payments ar	nd any rent for th	ie ground o	r lot.		4.	\$	1,258.00
	If not include	ded in line 4:						
		estate taxes				4a.		0.00
	•	erty, homeowner'				4b.		70.00
				ipkeep expenses		4c.		100.00
5.		eowner's associa		our residence, such as ho	me equity loans	4d. 5.	•	350.00 0.00
J.		v. iyaye payili	CALCALOT YO	rai reciacites, such as 110	mo oquity idalib	J.	Ψ	U.UU

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ies:		
Electricity, heat, natural gas	6a. \$	65.00
Water, sewer, garbage collection	6b. \$	0.00
Telephone, cell phone, Internet, satellite, and cable services	6c. \$	260.00
Other. Specify:	6d. \$	0.00
I and housekeeping supplies	7. \$	500.00
Icare and children's education costs	8. \$	400.00
ning, laundry, and dry cleaning	9. \$	250.00
onal care products and services	10. \$	50.00
cal and dental expenses	11. \$	203.33
sportation. Include gas, maintenance, bus or train fare.	· · · · · · · · · · · · · · · · · · ·	203.33
ot include car payments.	12. \$	300.00
rtainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
itable contributions and religious donations	14. \$	20.00
rance.		
ot include insurance deducted from your pay or included in lines 4 or 20.		
Life insurance	15a. \$	0.00
Health insurance	15b. \$	0.00
Vehicle insurance	15c. \$	160.00
Other insurance. Specify:	15d. \$	0.00
s. Do not include taxes deducted from your pay or included in lines 4 or 2 ify:	0. 16. \$	0.00
Ilment or lease payments:		
Car payments for Vehicle 1	17a. \$	0.00
Car payments for Vehicle 2	17b. \$	0.00
Other. Specify:	17c. \$	0.00
Other. Specify:	17d. \$	0.00
payments of alimony, maintenance, and support that you did not rep	port as	
cted from your pay on line 5, Schedule I, Your Income (Official Form	6I). 18. \$	0.00
r payments you make to support others who do not live with you.	\$	0.00
ify:	19.	
r real property expenses not included in lines 4 or 5 of this form or o		
Mortgages on other property	20a. \$	0.00
Real estate taxes	20b. \$	0.00
Property, homeowner's, or renter's insurance	20c. \$	0.00
Maintenance, repair, and upkeep expenses	20d. \$	0.00
Homeowner's association or condominium dues	20e. \$	0.00
r: Specify:	21. +\$	0.00
monthly expenses. Add lines 4 through 21.	22. \$	4,086.33
result is your monthly expenses.		
ulate your monthly net income.		
Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,041.38
Copy your monthly expenses from line 22 above.	23b\$	4,086.33
Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	-44.95
Copy your monthly expenses from line 22 above. Subtract your monthly expenses from your monthly income.	23b\$	4,0

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Northern District of Illinois

In re	Maria S Kouzoukas		Case No.	
		Debtor(s)	Chapter	7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date

Signature

Maria S Kouzoukas

Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.

18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Northern District of Illinois

In re	Maria S Kouzoukas			Case No.	
	. •	Debtor	(s)	Chapter	7
		STATEMENT OF FINA	NCIAL AFFA	IRS	
proprieto activities name and	This statement is to be completed to uses is combined. If the case is filed at petition is filed, unless the spouse or, partner, family farmer, or self-em as well as the individual's personal address of the child's parent or guan 112; Fed. R. Bankr. P. 1007(m).	s are separated and a joint petition is ployed professional, should provide affairs. To indicate payments, trans	arried debtor must for not filed. An indiving the information requirements and the like to refer and the like t	urnish informat dual debtor eng uested on this s ninor children	tion for both spouses whether or gaged in business as a sole statement concerning all such state the child's initials and the
Questions to any qu	Questions 1 - 18 are to be complete s 19 - 25. If the answer to an appli estion, use and attach a separate she	cable question is "None," mark th	e hox labeled "Nor	e " If addition	al snace is needed for the encure
		DEFINI	TIONS		
other than for the pu debtor's p	"In business." A debtor is "in business for the purpose of this form if the diving: an officer, director, managing a a limited partner, of a partnership; rpose of this form if the debtor engarimary employment. "Insider." The term "insider" includes one of which the debtor is an officer ives; affiliates of the debtor and insider.	executive, or owner of 5 percent or a sole proprietor or self-employed figes in a trade, business, or other act es but is not limited to: relatives of director, or person in control: office	s immediately precedure of the voting of all-time or part-time ivity, other than as a the debtor; general press directors and an	ding the filing of requity securit. An individual in employee, to	of this bankruptcy case, any of ies of a corporation; a partner, debtor also may be "in business' supplement income from the lebtor and their relatives;
	1. Income from employment or	operation of business			
None	year to the date this case was com calendar year. (A debtor that mair report fiscal year income. Identify each spouse separately. (Married	the debtor has received from emplo- ities either as an employee or in inc menced. State also the gross amoun tains, or has maintained, financial r the beginning and ending dates of t debtors filing under chapter 12 or ch s are separated and a joint petition is	ependent trade or buts received during the ecords on the basis of the debtor's fiscal yeapter 13 must state in	usiness, from the two years important of a fiscal rather art). If a joint pe	ne beginning of this calendar nmediately preceding this r than a calendar year may
	AMOUNT \$0.00	SOURCE 2015 YTD:			
	\$0.00	2014:			
	\$0.00	2013:			
•	2. Income other than from emplo	oyment or operation of business			
None	each spouse separately. (Married of	ed by the debtor other than from empreceding the commencement of the ebtors filing under chapter 12 or chars separated and a joint petition is	s case. Give particulate in the state in the	lars. If a inint n	petition is filed state income for

AMOUNT

\$48,496.56

SOURCE

2014: Disability

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B7 (Official Form 7) (04/13)

AMOUNT \$48,496.54 SOURCE

2013: Disability

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR American Express Box 0001 Los Angeles, CA 90096-8000

DATES OF **PAYMENTS**

AMOUNT PAID

AMOUNT STILL OWING

\$2,500.00

\$1,389.33

None

Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> DATES OF PAYMENTS/ **TRANSFERS**

AMOUNT PAID OR VALUE OF **TRANSFERS**

AMOUNT STILL **OWING**

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING**

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF **PROCEEDING** COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

U.S. Bank v. Maria Kouzoukas - 14 CH 17221

Foreclosure

Cook County Circuit Court

Pending Pending

Oakwood Court Condominium v. Marja Kouzoukas

Eviction

Cook County Circuit Court

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B7 (Official Form 7) (04/13)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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B7 (Official Form 7) (04/13)

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Ottenheimer Law Group, LLC 750 Lake Cook Road Suite 290 Buffalo Grove, IL 60089

DATE OF PAYMENT. : NAME OF PAYER IF OTHER . THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$2,500.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all-property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER **DEVICE**

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None П

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

Liberty Savings

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

Miscellaneous papers. grandfather's war

medals

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13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

· AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT

NOTICE

LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous None Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF **GOVERNMENTAL UNIT**

DATE OF

ENVIRONMENTAL

NOTICE LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

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NAME AND ADDRESS OF **GOVERNMENTAL UNIT**

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books None of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None 32

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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7_

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR-

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

顯

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY
OR DESCRIPTION AND
VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto

and that they are true and correct.

Signature

Maria S Kouzoukas

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

United States Bankruptcy Court Northern District of Illinois

	Northern District of Illi	nois		
In re Maria S Kouzoukas		Case No.		
	Debtor(s)	Chapter	7	
			. •	
CHAPTER 7 INDIVID	OUAL DEBTOR'S STAT	EMENT OF INTEN	TION	
PART A - Debts secured by property of the es				
property of the estate. Attach addition	nate. (I all A must be jumy	completed for EACH	debt which is secured b	
Property No. 1	pages it necessary.)			
Craditaria Nama				
Creditor's Name: Oakwood Court Condominium Assoc.	Describe P	Describe Property Securing Debt:		
	Deptor's re	sidence - 6565 N. Harle	m, Chicago, IL 60631	
Property will be (check one):				
☐ Surrendered	Retained			
If retaining the property, I intend to (check at least	one).			
☐ Redeem the property	one).			
Reaffirm the debt				
☐ Other. Explain(fo	or example, avoid lien using	11 U.S.C. § 522(f)).		
Property is (check one):	e e e	- v	٠	
☐ Claimed as Exempt	Not claim	ed as exempt		
	— Ivot claim	icu as exempt		
Property No. 2				
Creditor's Name:	D			
U.S. Bank	Describe Pro	operty Securing Debt: idence - 6565 N. Harlen	n Chinama II 00004	
Decomposition 2011 (1)	- 52.10. 0 100		ii, Chicago, IL 60637	
Property will be (check one): ☐ Surrendered				
in Surrendered	Retained			
f retaining the property, I intend to (check at least of	one):			
☐ Redeem the property	,			
Reaffirm the debt				
☐ Other. Explain(for	r example, avoid lien using 1	1 U.S.C. § 522(f)).		
Property is (check one):				
Claimed as Exempt	□ Not claime	ed as avamnt		
	Trot claime	d as exempt		
ART B - Personal property subject to unexpired lea	uses (All three columns of D	(B) (1		
ttach additional pages if necessary.)	ses. (An unee columns of Pa	irt B must be completed	for each unexpired lease.	
roperty No. 1				
essor's Name:	Y			
NONE-	e Leased Property:		ssumed pursuant to 11	
		U.S.C. § 365(p)	(2):	

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Page 2

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date

2-6-11

Signature

Maria S Kouzoukas

Debtor

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United States Bankruptcy Court Northern District of Illinois

In	re _Maria S Kouzoukas	Case 1	Vο	
	Debtor(s)	Chapte		7
	DISCLOSURE OF COMPENSATION OF AT	TTORNEY FOR	DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I ampaid to me within one year before the filing of the petition in bankruptcy, or agre behalf of the debtor(s) in contemplation of or in connection with the bankruptcy	ed to be paid to me for	ve-nai servi	med debtor and that compensation ces rendered on
	For legal services, I have agreed to accept	\$		2,500.00
	Prior to the filing of this statement I have received	\$		2,500.00
	Balance Due			0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compensation with any other p	person unless they are m	embe	ers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or per copy of the agreement, together with a list of the names of the people sharing	rsons who are not memb in the compensation is	ers of	r associates of my law firm. A ned.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all	aspects of the bankrupto	cy cas	se, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor b. Preparation and filing of any petition, schedules, statement of affairs and plan c. Representation of the debtor at the meeting of creditors and confirmation hear d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value reaffirmation agreements and applications as needed; prepar 522(f)(2)(A) for avoidance of liens on household goods. 	which may be required; ing, and any adjourned le: exemption planning	hearir	ngs thereof;
).	By agreement with the debtor(s), the above-disclosed fee does not include the foll Representation of the debtors in any dischargeability actions any other adversary proceeding.	owing service: , judicial lien avoida	nces	, relief from stay actions or
	CERTIFICATION		M	
this	I certify that the foregoing is a complete statement of any agreement or arrangeme bankruptcy proceeding.	ent for payment to me fo	r repr	resentation of the debtor(s) in
Date				
		tenheimer III 3127572 Law Group, LLC	2	3
	750 Lake Co			
	Suite 290			
	Buffalo Grov 847-520-9400	re, IL 60089)_ Fax: 847-520-9410		
	U-71-320-340(, I an. Utr -020-3410		

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court

		Northern	District of Illinois			
In re <u>Maria</u>	a S Kouzoukas			Case No.		
: '	: `		Debtor(s)	Chapter	7.	
	CERTIFICA UNDE	TION OF NOT R § 342(b) OF T	ICE TO CONSUM THE BANKRUPTO	ER DEBTOR CY CODE	(S)	
I (We)), the debtor(s), affirm that I	Certifica (we) have received a	ation of Debtor and read the attached not	cice, as required b	y § 342(b) of the	Bankruptcy
Maria S Kouze	oukas			1	0	7/1/1/5
Printed Name((s) of Debtor(s)		Signature of Deb	otor	Date	7/0/1
Case No. (if kr	nown)		X			
			Signature of Join	t Debtor (if any)	Date	

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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United States Bankruptcy Court Northern District of Illinois

In re	Maria S Kouzoukas		Case No.	
		Debtor(s)	Chapter 7	
	•	·		
	VERIFI	ICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	35
	The above-named Debtor(s) herel (our) knowledge.	by verifies that the list of credite	ors is true and correct to	the best of my
Date:	2/4/1	Maria S Kouzoukas Signature of Debtor		c .

ABT Electronics Synchrony Bank P.O. Box 960061 Orlando, FL 32896-0061

Advocate Healthcare Lutheran General Hospital P.O. Box 4249 Carol Stream, IL 60197-4249

Advocate Healthcare Lutheran General Hospital P.O. Box 4249 Carol Stream, IL 60197-4249

Advocate Healthcare Lutheran General Hospital P.O. Box 4249 Carol Stream, IL 60197-4249

Advocate Lutheran General Hospital PO Box 4249 Carol Stream, IL 60197-4249

Advocate Lutheran General Hospital PO Box 4249 Carol Stream, IL 60197-4249

Advocate Medical Group P.O. Box 92523 Chicago, IL 60675-2523

Advocate Medical Group P.O. Box 92523 Chicago, IL 60675-2523

Allied Interstate, LLC P.O. Box 1954 Southgate, MI 48195-0954

Amazon, com Cardmember Service PO Box 15153 Wilmington, DE 19886 American Express Box 0001 Los Angeles, CA 90096-8000

Associated Allegerists 1300 Reliable Parkway Chicago, IL 60686

Citi Advantage PO Box 6500 Sioux Falls, SD 57117

City of Chicago Department of Finance 121 N. LaSalle Street Chicago, IL 60602

City of Park Ridge Photo Enforcement Program 75 Remittance Drive, Suite 6658 Chicago, IL 60675-6658

Douglas John Sury 128 South County Farm Road Wheaton, IL 60187

Gap PO Box 530942 Atlanta, GA 30353

Keay & Costello, P.C.
128 S. County Farm Road
Wheaton, IL 60187

Macy's PO Box 94578 Cleveland, OH 44101

Malcolm S. Gerald & Associates 332 S. Michigan Avenue, #600 Chicago, IL 60604

Midwest Dianostic Pahtology, SC 75 Remittance Dr Suite 3070 Chicago, IL 60675

Nationstar Mortgage P.O. Box 650783 Dallas, TX 75265

Nordstrom Nordstrom Bank PO Box 79134 Phoenix, AZ 85062

North University Health Systems c/o Van Ru Credit Corporation 1350 E. Touhy Avenue, Suite 350E Des Plaines, IL 60018-9207

NorthShore Univ. Health System c/o Pinnacle Management Srvices 830 Roundabout, Suite B West Dundee, IL 60118

NorthShore Univ. Healthsystem Billing Department 23056 Network Place Chicago, IL 60673

Northwest Medical Faculty Foundatio c/o Miramed Revenue Group, LLC 991 Oak Creek Drive

Oakwood Court Condominium Assoc. Cagan Management Group, Inc. 3856 Oakton Street Skokie, IL 60076

Oakwood Court Condominium Assoc. Cagan Management Group, Inc. 3856 Oakton Street Skokie, IL 60076

Old Navy PO Box 530942 Atlanta, GA 30353 Quest Diagnostics P.O. Box 740397 Cincinnati, OH 45274-0397

Quest Diagnostics P.O. Box 740397 Cincinnati, OH 45274-0397

TJX Rewards/SYNC P.O. Box 530948 Atlanta, GA 30353-0948

U.S. Bank c/o Shapiro Kreisman & Associates 2121 Waukegan Road, Suite 301 Bannockburn, IL 60015

Value City Furniture PO Box 659704 San Antonio, TX 78265